

ATTACHMENT 3

Type of service code conversion chart for podiatry services

The following table lists the nationally recognized modifiers Medicaid providers must use in lieu of type of service (TOS) codes when submitting claims for podiatry services. A future *Wisconsin Medicaid and BadgerCare Update* will notify providers of specific effective dates of Wisconsin Medicaid's implementation of the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Category	Before HIPAA implementation	After HIPAA implementation
	TOS code and description	National modifier and description
Technical component of podiatry services	Podiatry services billed with TOS code "U"	TC Technical component
Professional component of podiatry services	Podiatry services billed with TOS codes "Q," "S," "T," "W," or "X"	26 Professional component
Surgical assistance	Podiatry services billed with TOS code "8"	80 Assistant surgeon
Other podiatry services	Podiatry services billed with TOS codes "1," "2," "3," "4," "5," "6," "9," or "K"	No modifier needed for medical, surgery, consultation, complete, or other services